PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10848803

CLAIMS AS FILED - PART I								SMALL E	ENTITY		OTHER	R THAN
TOTAL CLAIMS			(Column 1)		(Column 2)		7 ·	TYPE [OR	•	
		48		·			RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			 	49 minus 20=		* 28		X\$ 9=		OR	X\$18=	504
INDEPENDENT CLAIMS			2 minus 3 = *					X43=		OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT	ESENT				+145=		OR	+290=	
*	the difference	e in column 1 is	less than ze	ess than zero, enter "0" in c			ı	TOTAL	+	OR	TOTAL	1274
	C	CLAIMS AS A	MENDE	MENDED - PART II					<u> </u>	J -	OTHER	
(Column 1)			_	(Columi		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	21.0104			X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPEND $I_1 \supset^{\psi};$				NDENT CLAIM			+145=		OR	+290=	
	4 9%						A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	
		(Column 1)	,	(Column		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF ML	Minus	ENDENT C	L AIM	= .		X43=	·	OR	X86=	
			ZEIN CE DEI	LINDLINI	LAIN	<u>. L</u>		+145=		OR	+290=	
							AI	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	
(Column 1) (Column 2) (Column 3)												
ENT C				HIGHES		•	Г		ADDI-	Ĺ		ADDI-
ENTC	`	CLAIMS REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	SLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
NDMENT C	Total	REMAINING AFTER AMENDMENT	Minus	NUMBE PREVIOUS	SLY		\vdash	RATE X\$ 9=	TIONAL FEE	ÓB	RATE X\$18=	
AMENDMENT C	Total Independent	REMAINING AFTER AMENDMENT *	Minus	NUMBE PREVIOUS PAID FO	SLY PR·	EXTRA	\vdash		TIONAL FEE	ÓR OR		TIONAL
AMENDMENT	Total Independent FIRȘT PRESE	REMAINING AFTER AMENDMENT	Minus JLTIPLE DEP	PAID FO	SLY PR	EXTRA		X\$ 9=	TIONAL FEE	OR OR	X\$18=	TIONAL